

AGENDA ITEM III A

PROPOSED ACADEMIC PROGRAMS

**LOUISIANA STATE UNIVERSITY HEALTH SCIENCES CENTER-
NEW ORLEANS**

DOCTOR OF PHYSICAL THERAPY

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BACKGROUND INFORMATION

Like all other medical and allied health academic programs, Physical Therapy education is subject to certification by an external accrediting agency. Board of Regents Academic Affairs Policy fully supports the necessity for professional accreditation of such programs. For Physical Therapy education, the appropriate accrediting agency is the American Physical Therapy Association's Commission on Accreditation in Physical Therapy Education (APTA/CAPTE). In the 1990's, APTA began to move toward requiring a minimum of a doctorate degree as a prerequisite for professional practice. The accrediting arm of APTA, CAPTE, initially issued a mandate in that regard, but in face of some opposition soften its position slightly. Instead of a finite date for total conversion of master-level Physical Therapy programs to the practitioner doctorate, CAPTE choose to approach the achievement of its goal through two related actions: (1) the adoption of a goals statement which stipulated that by 2020 all medical physical therapy services would be provided and/or overseen by doctorally educated professionals; and (2) the strengthening of accreditation standards which in effect make it extremely difficult for a master-level Physical Therapy education program to maintain CAPTE accreditation. As a result, it is inevitable that all former master-level Physical Therapy education programs will have to move to a practitioner doctorate.

REPORT OF THE EXTERNAL REVIEW COMMITTEE, WITH RESPONSES FROM LSUHSC-NO

INTRODUCTORY COMMENTS OF THE EXTERNAL REVIEW COMMITTEE

Report:

This report consists of the findings of the evaluatory committee following their review of the proposals to establish a Doctor of Physical Therapy (DPT) degree program at Louisiana State University Health Science Center-Shreveport and at Louisiana State University Health Science Center-New Orleans. This review was requested by the Louisiana Board of Regents. These findings result from a review of written materials presented to the evaluatory committee, site visits to the LSU Health Science Center at Shreveport and at New Orleans, and interviews with faculty, students and administrators at both sites. The people interviewed are detailed in Appendix 1 (Shreveport) and Appendix 2 (New Orleans). The findings are reported using the format of the specified topics below, as suggested by the Board of Regents. Overall, the evaluatory committee finds the proposals from both Shreveport and New Orleans to be favorable but expresses high caution as important stipulations must be reconciled to make these professional doctoral programs successful and prideful to the state of Louisiana.

As an additional note, the evaluatory committee wishes to commend the Louisiana Board of Regents for what the committee believes is a very thorough and fair process in reviewing new academic proposals. The invitation for an external committee to critically review the proposal, the faculty and students, and the institution as a whole is a testament to the devotion and commitment that the Board of Regents has in promoting the highest possible quality of its academic enterprise. It has been a learning experience and a privilege for this committee to contribute our expertise to the review process. The committee also wishes to commend Associate Commissioner Gerard Killebrew for his professionalism, his coordination of the multiple activities, and his overall hospitality that he showed to us.

STRENGTHS WHICH THE REVIEW COMMITTEE IDENTIFIED

Report:

[The committee noted the following proposal strengths:]

- Dedicated and enthusiastic faculty
- Commitment from Vice-Chancellor for Academic Affairs
- Support from the Dean of the College of Allied Health Professions
- High-caliber and enthusiastic students
- Opportunities for research collaborations amongst faculty
- Located in a health sciences center campus with many clinical facilities within walking distance of the educational program
- Inter-disciplinary teaching of physical therapy students through coursework and grand rounds
- Curriculum generally adequate to address the accreditation standards for a clinical doctoral program in physical therapy
- Emphasis on evidence-based practice in physical therapy
- Reasonably-priced tuition for a clinical doctoral program
- Supportive clinical instructors and clinicians within the state

**WEAKNESSES AND PROBLEMATIC AREAS WHICH THE REVIEW
COMMITTEE IDENTIFIED, WITH RESPONSES FROM LSUHSC-NO
PROGRAM/INSTITUTIONAL CULTURE MUST REFLECT DOCTORAL
EXPECTATIONS**

Report:

Every academic unit carries its own culture. This culture, whether explicit or implicit, includes the important values and guiding principles that direct the overall operations of the unit.

The culture observed by the evaluatory committee for the physical therapy program at LSU-New Orleans centers on student outcomes and clinical connectedness. These are time-honored values in physical therapy education. However, as doctoral education in physical therapy is new, a new and academically more sophisticated culture is now expected. Doctoral education is distinctly different from education at the baccalaureate and master's degree level. It signifies not only mastery of the highest level of knowledge of a discipline by students but also a commitment from faculty to advancing the core knowledge of that discipline. Whether the doctoral degree awarded to students is a research doctorate (PhD) or a clinical doctorate (DPT), the faculty of any doctoral program still bear the responsibility for advancing the science of that discipline.

The culture observed does not include sufficient attention to advancing rehabilitation science. The proposal does not describe the faculty's vision of where the program is headed, other than modifying the curriculum and awarding a doctoral degree. The mission of the school is stated but not the mission of the program. It is not stated explicitly where research stands in the future of the program, both from a faculty perspective and a student perspective. Although not stated explicitly, clinical service appears to be highly regarded in the vision of this program but at the expense of scholarly activity. The absence of research labs run by physical therapy faculty is noted. Also noted is the absence of substantial start-up dollars to catapult faculty into competitive research grant applications. Opportunities exist for collaboration with established NIH-funded faculty in the basic sciences and Medical School but definitive action along these lines is not recognized. Similarly, applications for career development grants from NIH, mentored by faculty already holding NIH funds, is not recognized. The tenure code appears to be soft and flexible such that faculty who show expertise in teaching or clinical service, but not so much in research, can achieve tenure.

Still, the Health Science Center at LSU-New Orleans has rich resources and a rich history of scholarly activity. The physical therapy faculty can capitalize on this foundation but the faculty must first define the overarching culture that embodies the proposed degree with specific regard to such concerns as teaching contact hours, clinical hours, service hours, internal and external grant applications, peer-reviewed publications, rank of journals to which papers are submitted, scientific presentations, proper number of core faculty, desired area of expertise of new faculty, faculty recruitment, faculty development, faculty evaluation, tenure code, laboratory space,

collaborations with other faculty, student tuition, state allocations, faculty salaries, national reputation, etc.

The evaluatory committee recommends that:

- ***Faculty define and create a scholarly culture consistent with awarding of a doctoral degree.***

Response:

Departmental faculty members recognize that the desired culture of the proposed program must be reviewed, defined, and documented in the context of a doctoral-level academic enterprise. As stated in the report of the Evaluatory Committee, every academic unit carries its own culture. We, like many other physical therapy programs, have traditionally focused on “student outcomes and clinical connectedness.” However, as we transition to doctoral level education (DPT) this focus will be shifted toward the advancement of knowledge within rehabilitation science.

We understand that the advancement of knowledge is an essential core to all professions and that research is the most valuable tool available. Over the years, departments similar to ours within schools of allied health throughout the country have traditionally emphasized teaching over scholarship and, thus, scholarly activity has been limited. According to a report by the Association of Schools of Allied Health Professions (ASAHP) Task Force on Research and Scholarship, the average percentage of time spent on research activities is 12% while service is 22%. Both of these figures are out of proportion to faculty members in other disciplines outside of allied health.

We agree that the culture of the department needs to be more focused on the pursuit of knowledge. However, we also understand that culture does not change quickly and often does not come without a price. Accordingly, our department has already begun to move in this direction over the past several years. With that being said, it is still imperative that the culture continue to change to allow the faculty to advance the science of our profession.

To change the current culture of the department, we plan to do the following:

1. Revise teaching loads of current faculty members to allow sufficient time for research.
2. Reduce the number of clinic/service hours to allow sufficient time for research.
3. Collaborate with the Associate Dean for Research within the school to cultivate faculty development in research.
4. Continue our monthly research colloquia to enhance ideas for research among core faculty members and faculty members outside the Department.
5. Increase professional relationships with existing LSUHSC faculty who hold NIH funding.

6. Establish specific, attainable, realistic, and timely goals in regard to faculty expectations for scientific publications and presentations.
7. Provide clear expectations regarding research for all future faculty members hired. We will hire 4 new faculty members, of which two will be senior level with successful Research experience and two will be junior level with the potential for success. Ideally, one of these new faculty members will be from an under-represented population.
8. Identify space for dedicated research that can be utilized for rehabilitation research.
9. Seek approval of the School of Allied Health Professions Research Incentive Plan.
10. Apply for funding for graduate assistantships which will assist faculty members in implementing research agendas.
11. Actively participate on the LSUHSC translational research teams.

We agree with the consultants that, by making these changes, our students will become more valuable to the health care team. Our faculty members are in pursuit of the best evidence-based practice which is fostered in our students and contributes to our students becoming lifelong learners. We will seek to provide an environment that further supports the sharing of ideas, values, and philosophies between patients, students, and faculty.

Upon review by the Evaluatory Committee, the Departmental Faculty members have redesigned the Departmental Vision Statement, in keeping with the Vision Statement of the Louisiana State University Health Sciences Center in New Orleans. The Department will be recognized for its:

Campus culture of learning and discovery, positioned for constant change and continuous growth and exploitation of opportunities.

Skilled professionals, who are specialists in concentrated areas of physical therapy, who produce innovative education for physical therapy students, enhance acquisition of research grants and knowledge, and provide excellence in all patient care.

Bright future, entwined with community and local partnerships, to serve the needs of the State of Louisiana as well as the nation with more health professionals, new knowledge, and excellent clinical care.

The implementation of these goals will lift the confidence and performance of all members of the LSU Health Science Center Community in New Orleans, and there will be ever-widening awareness among our peer Academic Health Centers.

GENERAL CURRICULAR REFINEMENTS NEEDED

Report:

The proposed DPT program at LSUHSC New Orleans is 115 credit hours with an option of an additional three to six credit hours. Students (past and current) who were interviewed expressed a desire to have elective courses in the curriculum either during the 2nd or 3rd year of the program. The students also expressed a desire to have coursework focused on special topics in physical therapy offered as electives. This would allow for more individualized coursework for the students which should be a part of a doctoral program. However, as stated in the proposed curriculum, not all students would be expected to engage in these additional hours. Given that not all students will engage in this option, the program must address the issues of scheduling such courses and consider the use of independent study, web-based, or intense weekend coursework.

The evaluatory committee also noted that the number of weeks spent in clinical internship experiences in the proposed DPT program is less than typically expected in clinical doctoral programs. In fact, the proposed program represents a decrease in the number of weeks of clinical experiences, from 31 full-time weeks for the MPT program to 30 weeks for the DPT program. If the intent is to prepare doctorally-prepared clinicians who are capable of engaging in independent practice in an increasingly complex practice arena, high quality and diverse clinical experiences are necessary. Although students are exposed to patient care throughout the proposed curriculum, the full-time clinical experiences should also address areas of clinical practice such as administration, consultation, supervision, and health policy. The inclusion of more clinical experiences is needed in order to address this necessity.

Therefore the committee recommends that:

- ***Independent study courses or intense weekend courses be considered as a method of providing these elective hours rather than scheduling specific courses during the time that all students are on-campus for didactic coursework. The use of elective courses would allow more individualization of the program, which is appropriate for doctoral students.***
- ***The number of weeks of clinical externships be increased to be consistent with the national average of 36.5 weeks reported in the 2004 Biennial Accreditation Report.***

Response:

The LSUHSC Department of Physical Therapy (Department) has redesigned the proposed DPT curriculum. The four elective courses in the original proposal have been deleted and four new electives have been added: PTH 8311, 8312, 8313, and 8314. One elective course will be offered during the fall and spring semesters of the second and third years. The elective courses will, as suggested by the Committee, consist of independent study as well as “intense weekend courses.... as a method of providing these elective hours rather than scheduling specific courses

during the time that all students are on campus for didactic course work. The use of elective courses allow more individualization of the program, which is appropriate for doctoral students.”

The Committee also recommended that the “number of weeks of clinical externships be increased to be consistent with the national average of 36.5 weeks reported in the 2004 Biennial Accreditation Report.” In the revision of the proposed DPT curriculum, the number of weeks of full-time clinical externships has been increased to a total of 38 weeks which exceeds the national average. Clinical education will occur across the curriculum and will be concentrated in five clinical education courses over the three-year duration of the program.

The first full-time clinical experience will be PHTH 7380: Introduction to Clinical Practice, a one semester hour credit course held at the end of the first fall semester. The experience will be structured using daily learning units that will assist and guide the clinical instructor and the student toward the learning objectives of the **two-week** clinical experience. The overall objective of the course will be to introduce the students to the clinical application of physical therapy and reinforce those skills and learning outcomes covered in the summer and fall semesters.

The second full-time clinical experience, PHTH 7381: Clinical Experience, will be a **six-week** internship during the summer semester after the first year. The purpose of this clinical experience will be to further introduce students to clinical settings and give the students opportunities to initiate hands-on clinical practice. The learning objectives for this clinical experience will focus on the skills and topics covered in the first year of the curriculum as well as affective aspects of practice such as professionalism and empathy. The students will be placed in any of a number of settings, as the general objectives of the clinical will be applicable to any and all physical therapy settings.

The third clinical experience is the first of three ten-week internships. PHTH 7382: Clinical Internship 1, will be a **ten-week** clinical internship held during the summer semester following the second year. Students will be placed in either an orthopedic outpatient, inpatient acute, or neurological rehabilitation setting. At the completion of the third internship, the student will have gained experience in all of the three major areas listed above. The learning objectives of this clinical will address all of the didactic course work covered in the curriculum thus far, the affective aspects of clinical practice, as well as completion of a research module. This research module will require the student to apply evidenced-based physical therapy practice in the clinical setting and record this process through “reflective journaling.”

The fourth clinical experience is another **ten-week** clinical affiliation and is scheduled during the fall semester of the third year. PHTH 7383: Clinical Internship 2, will address the same learning objectives as Clinical Internship 1. However, rather than a research module, the student will be required to perform an educational module. Toward the end of the clinical experience, the third year student will be “paired” with a first year student enrolled in Introduction to Clinical Practice. In this module, the third year student will be in charge of supervising the first year student which

will reinforce the learning objectives of the Professional Practice I – V and Practicum in Client / Peer Teaching course work. The Clinical Instructor of the facility will ultimately be supervising both students, but the third-year student will be responsible for mentoring first-year students in completing the daily learning units. The Clinical Instructor will not only assess the third-year student's ability to perform effective physical therapy practice, but also the student's ability to teach and assess peers.

The fifth and final **ten-week** internship is PHTH 7384: Clinical Internship. During this administrative module, the student will be required to participate in learning about the administration of the facility in which the student is placed. The student will be given the opportunity to work alongside administrators of the facilities to gain a deeper insight and experience in the administrative aspects of physical therapy practice. The module will require the student to complete an administrative project as well as keep a “reflective journal” describing the experience.

The addition of PHTH 7380: Introduction to Clinical Practice and the addition of two weeks to each of the clinical internship courses will enhance the clinical education component of the Doctor of Physical Therapy program. With the addition of eight full weeks of clinical experience to the curriculum, LSUHSC will have more than the national average number of weeks of clinical education experiences. Furthermore, this addition to the clinical education component of the curriculum will greatly strengthen the preparation of our students to be better clinicians in the field of physical therapy at the clinical doctoral level.

STUDENT RESEARCH EXPERIENCE NEEDS TO BE STRENGTHENED

Report:

The evaluatory committee in reviewing research courses in the proposed curriculum found that not all students are expected to participate fully in the completion of a research project. Although utilization of research and the use of evidence-based practice is a priority of the program, the educational experiences for students in the area of research appears lacking. All students are not required to develop Institutional Review Board (IRB) applications (exempt or non-exempt) or informed consent forms. All students are not expected to gather data or interpret outcomes of the research. The evaluatory committee recommends that all students who graduate from a clinical doctoral program need these experiences. Additionally, the committee recommends that groups of students (4 or 5 students per group) be identified by faculty members for each of the projects. This will allow the program to adequately manage the time utilization and resource management for those faculty members who are qualified to direct student research. The committee also recommends the use of faculty from the basic sciences and clinical sciences programs as well as the medical school as research advisors for the student research projects. Support for this type of interaction by these programs was evident during the site visit by the Dean of the School of Allied Health Professions and the Vice Chancellor for Academic Affairs. The Program in Physical Therapy should take advantage of these opportunities that are afforded to them on the New

Orleans campus.

The evaluatory committee therefore recommends:

- ***All students should be required to fully participate in the research process including the development of a research proposal, application to the campus IRB, collection of data and analysis of the outcomes. Completion of a research project should not be delegated to an elective course in the curriculum.***
- ***Utilization of student research groups for the research project in order to adequately management time commitments of the faculty and resources of the program.***

Response:

As proposed by the Evaluatory Committee, the following changes have been incorporated in the revised DPT curriculum:

All students should be required to fully participate in the research process including the development of a research proposal, application to the campus IRB, collection of data and analysis of outcomes. Completion of a research project should not be delegated to an elective course in the curriculum. Utilization of student research groups for the research project in order to adequately (manage) time commitments of the faculty and resources of the program.

The original DPT proposal included instruction in conducting research, research methods, and the ethical conduct of scientific research. However, whether a student fully participated in all these processes varied depending upon the requirements for their capstone project or whether they enrolled in research electives. The following changes were made in the DPT proposal to meet the Evaluatory Committee's recommendation that all students (working in groups with a faculty advisor) be required to fully participate in the research process:

Two courses, Research Electives PHTH 8312 and PHTH 8322, were eliminated from the curriculum and three semester hour credits of research were added to the total required hours by:

a) Changing the credit for PHTH 7305: Evidence-Based PT V from three to four semester hour credits; b) Changing the credits for PHTH 7306: Evidence-Based PT VI, Capstone Completion and Defense from two to four semester hour credits.

Evidence-based practice is a priority of the present MPT program and will continue to be a priority of the DPT curriculum. The revised DPT curriculum includes three courses in which students learn how to APPLY research in clinical decision making: PHTH 7101 (Evidence-Based PT I), PHTH 7102 (Evidence-Based PT II), and PHTH 7203 (Evidence-Based PT III). In addition, the principles of scientific inquiry and evidenced-based practice are threaded throughout the DPT curriculum and, thus, will be infused in ALL didactic and clinical course work.

The proposed curriculum now includes three courses in which students learn processes for CONDUCTING research: PHTH 7204 (Evidence-Based PT IV: Research Analysis), PHTH 7305 (Evidence-Based PT V: Research Analysis), and PHTH 7306 (Evidence-Based PT VI: Capstone Completion & Defense). Research topics presented in these three courses include: writing a research proposal and IRB application, collecting and analyzing data, and presenting research both orally and in writing. These changes fulfill the recommendations of the Evaluatory Committee.

The Evaluatory Committee recommended that “groups of students (four or five students per group) be identified by faculty members for each of the (research) projects.” The committee also recommended that faculty members in the Department continue the present practice of utilizing faculty members from the “basic sciences and clinical sciences programs as well as the medical school as research advisors for the student research projects.” Departmental faculty members will continue to work closely with other established researchers at LSUHSC as advisors for the student research as well as clinical scientists outside the LSUHSC system.

INTERDISCIPLINARY COURSES SHOULD BE RETAINED

Report:

Interdisciplinary courses in the current curriculum should be retained. The inclusion of the interdisciplinary anatomy and physiology courses within the proposed program is appropriate. The faculty should also explore interdisciplinary courses with medical students perhaps as elective coursework. Students during the interviews identified the Grand Rounds for the School of Allied Health Professions as a strength of the current program. However, they also expressed a desire that additional opportunities for interactions with other students on campus be included in the new curriculum.

Response:

The Departmental faculty members also will develop more interdisciplinary courses as elective course work with the Medical School, the Graduate School, other allied health disciplines, etc.

NEW CURRICULUM SHOULD BE SHARED WITH STUDENTS

Report:

During the interviews with the students, it was not apparent that any of the students had seen the proposed curriculum and that discussions of the proposal had taken place between faculty and students.

The evaluatory committee strongly recommends that the proposed curriculum be shared with current students in the program to gain their valuable input.

Response:

The Department had not previously discussed the proposed DPT program in great detail with students currently enrolled in the MPT program since the Louisiana Board of Regents had not yet approved the DPT degree program. However, as suggested by the Evaluatory Committee, the proposed curriculum has now been shared with students currently enrolled in the MPT program to get their input and suggestions regarding the proposed DPT program. Departmental faculty members continue to seek advice from the DPT Advisory Board which consists of therapists in the community and surrounding areas (Baton Rouge, Hammond, etc.). One of the community members of the Advisory Board is a graduate of our MPT program, and the other members are graduates of other MPT or DPT programs throughout the country. The Board members have diverse backgrounds, education, and specialty areas and are employed in a variety of health care settings.

TRANSITIONAL DPT SHOULD BE RECONSIDERED AT A LATER DATE

Report:

Last, information about the implementation of the *transitional* DPT program was lacking in the initial proposal and was not presented to the evaluatory committee until the site visit. Based upon the recommendations that are being presented for the implementation of the DPT program, no decisions can be made about the implementation of the transitional DPT program.

The evaluatory committee recommends that an additional review and on-site evaluation be done for the transitional DPT program once the DPT has been approved and implemented.

Staff Comment:

This issue was not directly addressed by LSUHSC-NO.

MINIMUM GRE SCORES ARE LOW

Report:

The admissions criteria proposed are appropriate, as are the prerequisite courses required of applicants. However, the requirement of a score of 800 in the verbal and quantitative sections of the GRE seems low relative to the standard requirements of other DPT programs.

The evaluatory committee recommends that:

- ***The program requires competitive GRE scores of all applicants, and that the scores are used in evaluating applicants for admission into the program.***

Response:

The Department will change the requirement on the verbal and quantitative portions of the GRE to a total of 900. Scores, of course, will continue to be utilized in the selection of students into the program. It is noted, however, that the total score of 900 on the GRE is merely the minimum score to be considered eligible for consideration and in no way implies that a score of 900 is a “competitive” score. Potential applicants always have been told explicitly that admission into the Department is on a competitive basis and meeting the minimum requirements does not guarantee acceptance into the program. Many factors must be taken into consideration when making decisions as to an individual’s suitability for the program and for the profession.

MINORITY RECRUITMENT EFFORTS NEED TO BE STRENGTHENED

Report:

The program has been successful in attracting a limited number of minority students. Students and faculty reported using minority students to recruit other minority students, resulting in the successful recruitment of a few minority students. Six of the 35 students in the first-year class and two of the 35 second year students are minorities. This level of achievement in minority student recruitment seems low given the demographics of New Orleans and its surrounding communities.

The evaluatory committee recommends that:

- *The program improves its efforts in recruiting minority students by exploiting existing opportunities such as the presence of higher institutions of education with a preponderance of minority students in New Orleans.*

Response:

The Evaluatory Committee noted that the program has been successful in attracting a limited number of minority students; however, continued efforts will be taken to increase the number of qualified minority applicants. Recruitment visits are made throughout the year to undergraduate institutions in Louisiana. Year-round admission counseling is conducted by the Department. In addition, the School also conducts workshops for pre-allied health college advisors to keep them up-to-date with admission requirements and to strengthen their links with our program. Likewise, members of the Admissions Committee currently recruit potential students from historically black universities, and faculty members serve as liaisons between the universities and the Department. Frequently during recruitment events at these universities, the faculty members are confronted by students who report that they are only interested in a medical degree. It is believed that, by offering a clinical doctoral degree, the number of highly-qualified, science-oriented minority applicants will increase. The Department recognizes the importance of further investment in the effort to identify, attract, select, and retain talented students who are from under-represented

groups.

Minority recruitment continues to be a priority for the Department and the School and the results of our efforts to this effect are being reflected in the present classes. However, our focus on minority recruitment will be re-enforced and a further commitment made. Obviously, recruitment and retention rates of minorities would be greatly enhanced by having Physical Therapy faculty members who are from under-represented populations. The Department will strive to recruit at least one of the newly-projected faculty members from an under-represented population.

Further plans to address the issue of minority representation include the establishment of a "Diversity Team." The Team will consist of therapists from under-represented minorities from throughout the state. The Diversity Team members will be crucial to successful recruitment and will help develop strategies for building diversity and will serve as consultants to the faculty and students in the program as well.

ADDITIONAL FACULTY ARE ESSENTIAL

Report:

Of all the factors influencing the success of the proposed program, the program's faculty will be the most important. The evaluatory committee has two concerns: the number of faculty, and their qualifications.

Regarding number: currently, 8.3 core faculty members are listed. However, additional information provided to the evaluatory committee indicates that the percentage of effort for administration and service is inordinately high, which reduces the true number of FTEs devoted to scholarly activity and teaching. The faculty clinical practice should certainly continue as it holds high value, but the program needs to define "service" and distinguish between service required to generate revenue for the program and service (internal/external) required to fulfill the expectations of a scholarly, doctoral-level academic program. Once defined, the number of core faculty FTEs should be recalculated and reviewed in light of the program's vision and mission (see Culture below).

Regarding qualifications, the current faculty appear to be properly qualified in their teaching roles, as students spoke highly of their enthusiasm and teaching ability and clinical supervisors spoke highly of the quality of the graduates from the program. However, the faculty role as scholars in producing new knowledge, although acceptable for a master's degree program, does not meet the expectations for a doctoral-level program. Two faculty members have published recently in peer-reviewed journals and show potential for becoming strong scientists. Others are pursuing PhD degrees, and this also is commendable. But, on balance, the 10 core faculty listed do not show a collective record of scholarship and grant activity consistent with the expectations of a program that will graduate students with a doctoral degree.

This finding makes the hiring of the proposed number of 4 new PhD faculty members critical. Four should be the minimum. This number, in combination with the continued development of existing faculty, should create the critical mass of scholars necessary to fulfill the expectations for generating new knowledge in rehabilitation science, mentoring DPT students through group pilot research projects, and earning a national reputation for the program. Recruitment of these new faculty members should begin as soon as the DPT program is approved, as national competition is keen for the most talented individuals. At least one but preferably two of the faculty should be experienced researchers with a strong record of primary-authored (first or last) publications and grants as principal investigator so that they can help mentor the other faculty. The other two can be more junior PhD faculty but still with a record of co-authored publications and, most importantly, with a realistic plan for future research that coincides with opportunities at LSU-New Orleans.

The evaluatory committee recommends that:

- *Four new PhD (or equivalent) faculty with research experience be hired.*

Response:

Currently, the Department employs eleven faculty members as core faculty. Seven of the faculty members are employed full-time as academicians. The other four faculty members are employed on a part-time basis (two at .5 FTE, one at .3 FTE and one faculty member represents .1 FTE) for a total of 8.4 FTE. Since the on-site visit by the Evaluatory Committee, the percent effort of two of the faculty members already has been increased from .5 FTE to .7 FTE, resulting in a total now of 8.8 FTE for the academic program. The addition of four new faculty positions will certainly make a crucial and important positive impact on the Department, the School, and ultimately on the Health Sciences Center, enabling the department to enhance research efforts considerably.

As soon as the DPT proposal is approved and the funding allocated, a Faculty Search Committee will be formed to begin the national search for highly-qualified individuals to join the faculty. Departmental faculty members also recognize that recruiting such high-caliber academicians will be a tremendous challenge. Likewise, our present faculty members look forward with great anticipation to the opportunities that will be provided with the addition of the new faculty members with research programs. It is our hope that the DPT degree will be approved by the Louisiana Board of Regents by May 2005 so that we may begin recruitment in June 2005 when our national physical therapy conference is held. The conference provides outstanding opportunities for faculty members to identify and recruit highly-qualified individuals.

ADEQUATE FACULTY HIRING PACKAGES WILL BE REQUIRED/EXPECTATIONS FOR FACULTY SHOULD BE CLEAR

Report:

Start-up packages that include equipment, lab space and possibly technical support staff will be needed. These positions should be tenure-track at the level of assistant professor or tenured at the level of associate professor or full professor as the credentials warrant. The allocation of effort between scholarship, teaching and service needs to be defined for these new faculty members, and redefined for existing faculty, to optimize scholarly productivity. The current allocation of teaching activity at 50-60% is too high to attract new faculty intending to become productive scholars, as well as being too high to promote success along a tenure track that requires grants and publishing in top-tier journals. An apportionment of roughly 70% research, 25% teaching and 5% service would be reasonable for individuals who are tenure track. The requirements for achieving tenure need to be clear, need to be reviewed annually, and need to be enforced. Achieving tenure in less than the traditional 6 years should be reserved for only those rare faculty members who show multiple research publications and win nationally competitive research grants early on. Faculty not demonstrating satisfactory progress need to be warned and, if satisfactory progress is not demonstrated soon thereafter, such faculty need to be terminated even before the end of the tenure clock so as not to give such faculty false hope and so that the program can pursue and develop other scholarly faculty early on.

The evaluatory committee recommends that:

- *[Adequate] start-up packages for new faculty in equipment and space must be arranged.*
- *Percentage of effort be distributed across research, teaching and service to promote research and grant productivity.*

Response:

As reflected in the Report of the Evaluatory Committee, the Department has a strong commitment from the Dean of Allied Health for funding for these new faculty positions, benefits, and start-up packages as well as funding for recruitment. Likewise, the administrators of the School and Health Sciences Center support the need for designated space for research activities.

Staff Comment:

Also, see response above.

FACULTY RESEARCH OPPORTUNITIES MUST BE ENHANCED

Report:

The evaluatory committee recommends that:

- *Collaborative opportunities with other successful researchers be facilitated.*

Response:

Faculty members in the Department are also committed to increasing our collaboration with other established researchers outside the Department, either within the School of Allied Health or other schools in the LSUHSC, as well as researchers in other local universities and hospitals. Other issues of research support for faculty members are outlined in the recently published White Paper for the LSUHSC: PROMOTING CLINICIAN-SCIENTISTS AT LSUHSC NEEDS AND POTENTIAL SOLUTIONS (See Appendix B). A Research Council has been established at the Health Sciences Center “to change the research culture to better support clinical research, improve the success of our recruitment and retention efforts in this area, and enhance the development of future clinician/scientists, thus strengthening our clinical research enterprise.” The institution has begun a Clinical/Translational Research Initiative which reflects the recognition of our research potential throughout the Health Sciences Center and identifies areas that need change. The White Paper recognizes the need to recruit and retain faculty researchers and the “urgent need to modify the current salary structure” to provide protected time for research, and research incentives. The Research Council also recognizes the need for grant support infrastructure. Other areas of focus in the White Paper include a mentor-mentee program to mentor junior faculty and areas of excellence to develop and promote translational research programs. Nine areas identified for potential research development include areas in which our faculty members can contribute, such as: the Neuroscience Center, the Cancer Center, the Children’s Research Institute, the Alcohol Center, the Cardiovascular Research Center, Trauma, and Research in Minority Populations.

COMPREHENSIVE FACULTY DEVELOPMENT PLAN/CLINICAL FACILITIES IMPROVEMENTS NEEDED**Report:**

At present, the majority of the faculty share the research facilities allocated to the Medical faculty with whom they collaborate in scholarly work. As noted above, there is an urgent need for the faculty to evolve into independently-funded researchers with independently-run laboratory and clinical facilities that support doctoral level education and research. It is disappointing that the proposal seems student-centered without a plan to foster the development of high-caliber faculty. If doctoral education is to be realized at the appropriate standard, it is imperative to develop and implement a comprehensive plan that encompass a coordinated array of activities which address the faculty inadequacies noted above, the lack of dedicated research space and equipment needed to promote independent research and funding, and the dearth of resources needed to foster doctoral education and the advancement of the science and practice of physical therapy.

Consequently, the evaluatory committee recommends that:

- *The institution develops and implements a comprehensive plan of faculty development*

coupled with the recruitment of high level faculty and the development of research facilities appropriate for the type of independent research activities that foster external funding, support doctoral level work, and advance the field of physical therapy.

Response:

While physical facilities are limited in our present location, this has not hampered the program's research efforts. The program secured a Board of Regents Enhancement Grant this past year that allowed for the purchase of \$ 35,000 worth of instructional and research equipment which has already been put to use by faculty researchers. Additionally, the program purchased \$45,000 worth of research equipment through self-generated funds. This equipment is also currently in use. An additional \$ 100,000 worth of external grant funding was obtained by another faculty member within the last five years. This has allowed for the purchase of additional equipment and has assisted in operation of the program.

As pointed out by the review team, collaborative opportunities exist in fully-equipped laboratories in the Health Sciences Center at Shreveport. We do not think it is necessary to duplicate equipment and space on the state's limited resources. Instead, we prefer to cultivate external funding opportunities through these collaborative relationships. In addition, the new Allied Health facility is expected to be completed in the Spring of 2006. This state-of-the-art facility will more than quadruple the space currently available to the program for research labs, classroom and laboratory instruction and clinical service. We still wish to emphasize our desire to produce strong, clinical research which can easily be carried out in the new 27,000 square foot clinical facility which will be physically attached to the academic/research tower. Total square footage available in the building will be approximately 72,000 square feet.

The Department Head will work closely with the Dean of the School of Allied Health Professions to ensure that space is dedicated for research and that the funding for the new faculty positions is secured. Presently, further opportunities for collaborative research as well as for additional research space are being discussed with the Department of Orthopedics in the School of Medicine.

BUDGETARY CONCERNS MUST BE ADDRESSED

Report:

The evaluatory committee did not see a detailed budget for the proposed program. Without line-item detail, it was not clear whether all expected expenditures are captured in the overall budget. Similarly, it was not clear what the funding sources include. It appears that state allocations, tuition, and clinical revenue are the main funding sources, but the proportion for each is not known. The biggest concern is the cost for 4 new faculty members. The evaluatory committee agreed that the current tuition is inordinately low for a graduate professional education program, especially one at the doctoral-degree level. The tuition proposed is roughly \$3000 per year, per

student, for a total of \$9000 for the full three-year program. Tuition for DPT degree programs at other public Universities is two to four times this amount. Obviously, this low tuition policy benefits the student greatly; however, the evaluatory committee is concerned that such low tuition could deprive the program of the revenue needed to run a high-quality doctoral-degree program. The state legislature recently approved a 25% tuition increase to the value stated above, making a further substantial increase unlikely in the near future. However, and importantly, the Vice Chancellor indicated that the institution, through one means or another, would cover the increased cost associated with the four new faculty members. The costs of recruiting four new faculty members must also be considered as start-up dollars for laboratory equipment and possibly technical support staff will be high. These costs for recruitment and development of new and existing faculty will be ongoing to transform and sustain a scholarly, doctoral-level program. This transformation is entirely possible, but it requires in the short run fulfillment of the commitment expressed by the vice-chancellor and, in the long run, a plan for tuition increases that are fair to both the student and the institution.

The evaluatory committee recommends that:

- ***Faculty, Administration, and the Board of Regents interact to define a budgetary plan to allow acquisition of the faculty, space, equipment, support staff, and operational resources needed to implement the proposed doctoral degree.***

Response:

The Evaluatory Committee did not request to see a detailed budget for the proposed program; however, the Evaluatory Committee agreed that “the current tuition is inordinately low for a graduate professional education program, especially one at the doctoral-degree level. The tuition proposed is roughly \$3000 per year, per student, for a total of \$9000 for the full three-year program. Tuition for DPT degree programs at other public Universities is two to four times this amount. Obviously, this low tuition policy benefits the student greatly; however, the Evaluatory Committee is concerned that such low tuition could deprive the program of the revenue needed to run a high-quality doctoral-degree program.”

We have assurance from the administration of the LSUHSC that the resources will be found for the Department. We have support from the Dean and Chancellor to establish the tuition for the new DPT program at approximately \$ 8,000.00 per year for in-state students. Legislative action, however, is required for this to occur, and it is anticipated that approval will be granted during the 2005 legislative session. This amount is the same as the amount Shreveport plans to implement for the new DPT program at the LSUHSC-Shreveport campus.

Present MPT Tuition: New Program Tuition:

Fall and Spring Semesters:	\$ 2,018	\$ 3,150
Summer semesters:	\$ 1,009	\$ 1,400
Total for year:	\$ 5,045	\$ 7,975

Examples of annual tuition for DPT programs at other state (public) schools are as follows:

University of Maryland	\$ 16,608
University of South Carolina	\$ 13,197
University of Alabama-Birmingham	\$ 11,224
University of Central Arkansas	\$ 10,000

According to the 2004-2005 LSUHSC catalog, Tuition is as follows:

Medicine	\$ 11, 613 (full-time, in-state residents)
Dentistry	\$ 9,874

Thus, a total tuition of \$ 8,000 per year seems in line with other programs in the LSUHSC yet is still decidedly lower than other public schools.

CONCLUSIONS OF THE EXTERNAL REVIEW COMMITTEE

Report:

The need is strong for a DPT degree program at Louisiana State University Health Science Center-New Orleans to continue to attract high-caliber students and deliver quality health care to the citizens of Louisiana. The evaluatory committee recommends conditional approval of the proposal for a DPT degree program to begin in the 2006-07 academic year. Importantly, this approval is contingent upon satisfactory resolution of the following stipulations:

1. The University must hire four new faculty members who show a record and passion for scholarly productivity. Two should be experienced academicians. Search should commence as soon as possible. Two of the faculty should be on board before the DPT program begins.
2. The desired culture of the proposed program must be reviewed, defined, and documented in the context of a doctoral-level academic enterprise. Accordingly, the program's mission and vision must also be defined.
3. Independent study courses or intense weekend courses must be included as a method of providing elective hours rather than scheduling specific courses during the time that all students are on campus for didactic coursework.
4. The number of weeks of clinical externships must be increased to be consistent with the national average of 36.5 weeks reported in the 2004 Biennial Accreditation Report.
5. The requirement that all students fully participate in the research process must be added to the curriculum.
6. Information about the implementation of the transitional DPT program was lacking in the initial proposal and was not presented to the evaluatory committee. Based upon the recommendations that are being presented for the implementation of the DPT program, no decisions can be made about the implementation of the transitional DPT program. The evaluatory committee recommends that an additional review and on site evaluation be done for the transitional DPT program once the DPT has been approved and implemented.

Response:

The faculty members of the Department want again to acknowledge the contributions and recommendations given by the Evaluatory Committee and Mr. Gerard Killebrew. The Departmental faculty hope that have addressed the recommendations to the Board's satisfaction. If any further information is required for clarification, please do not hesitate to contact us.

STAFF SUMMARY

The LSUHSC-S has responded appropriately to most of the recommendations of the external consultants. There remain, however, a few unresolved problematic areas.

Faculty Resources

The consultants strongly recommended that “the University must hire four new faculty members who show a record and passion for scholarly productivity. Two should be experienced academicians. Search should commence as soon as possible. Two of the faculty should be on board before the DPT program begins.”

In its response, the institution makes some corrections to the consultants’ perceptions of available faculty resources but does not disagree with the need for additional faculty. While the LSUHSC-NO provides some indications of plans to proceed as recommended, particulars should be stipulated in Regents actions to ensure that these resources are made available at the number, level, and time that the consultants determined was needed.

Long-Term Faculty Development Plan

The consultants recommended that long-term faculty development efforts will be required to develop and sustain a doctoral culture. Unfortunately, the institution did not supply any particular response to this recommendation.

Budgetary Concerns

The consultants believed that a long-term plan of financial solvency which anticipates costs for additional required resources must be discussed and developed soon. The development of these plans should involve appropriate staff from the institution, its system, and the Board of Regents. The institution agrees and has responded with a proposed tuition increase. It appears however that this tuition may be significantly less than similar programs/institutions within the SREB region. The staff concludes that a complete assessment of costs and revenues must be conducted as indicated by the consultants as soon as possible before program implementation.

Transition DPT Program

The consultants were concerned about references to a “transition” DPT program without specific regarding this innovation. Accordingly, they recommended that such a plan should be fully developed and reviewed at a later date. In its response to a similar recommendation, LSUHSC-S clarified that the use of the term “transition” was probably confusing and did not mean that a separate curriculum would be pursued, but rather the fully developed DPT used to handle students in transition.

LSUHSC-NO did not respond specifically to this recommendation, but if the same transition process as described by LSUHSC-S is also planned for the New Orleans campus, then a further

response is probably not necessary. Assuming this is the case, then no stipulation specific to this recommendation would be necessary in any subsequent Regents action.

STAFF RECOMMENDATIONS

The staff recommends that the Academic and Student Affairs Committee grant conditional approval for the proposed Doctor of Physical Therapy program (CIP Code 51.2308) at Louisiana State University Health Science Center-New Orleans, to be implemented beginning Summer 2006, subject to the following stipulations:

- 1. By December 1, 2005, the institution shall submit to the Commissioner of Higher Education a plan for the complete fulfillment of external consultant recommendations for additional faculty as stipulated in their report. Incomplete actions in this regard may necessitate a reconsideration of the projected implementation date for this program.*
- 2. This same report shall also provide details as to how the institution proposes to address external consultants expectations for a greater doctoral culture in the program; these details should include a long-term faculty development plan.*
- 3. As soon as feasible, appropriate staff of the LSUHSC-NO, the LSU System, and the Board of Regents shall meet to discuss and develop a comprehensive long-term budget for this program which incorporates an appropriate tuition increase and fully accounts for new required costs.*

Upon implementation of the DPT program, the existing Master of Physical Therapy program at the LSUHSC-NO shall be automatically terminated.